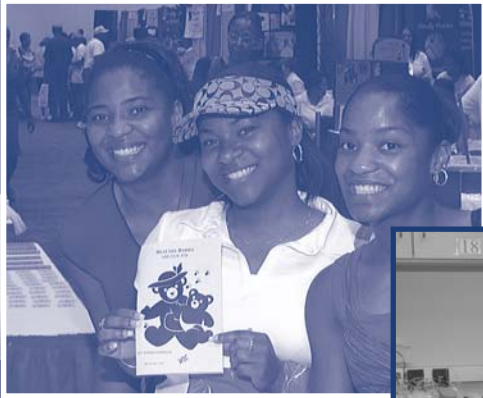


2003-04 Annual Report



Office of Women's Health

Indiana State Department of Health



Indiana is one of very few states that has had the foresight to create an office of women's health through legislation. During the 1999 session, the women's legislative caucus sponsored a bill to create the framework and funding for the Office of Women's Health (OWH), following Governor O'Bannon's announcement of the office's formation a year earlier. An advisory board was designated to lend support and counsel. The office was established to improve the health status of women in our state through assessment of health needs, increased public awareness and education, and development of women's health programming.

In the five years since its creation, the office has been forging connections with health care entities throughout the state. Its staff has focused on fulfilling the objectives set out from the beginning: helping to identify, coordinate and set statewide priorities for women's health programs; educating and advocating for women's health; serving as a clearinghouse for information; providing leadership and mentoring opportunities for young women, and securing partnerships with corporations and governmental agencies.

In the arena of women's health in America, the messages are mixed. On one hand, the breadth and pace of research and new technologies across the spectrum of women's health in recent years have been remarkable. We understand more today about disease causes and effects, risk factors, prevention, and early diagnosis than we could have imagined a few decades ago, and new studies are producing important results almost weekly. The challenge, however, which has yet to be met, is to apply this wealth of information to gain measurable improvement in the health and well being of women of all ages, races, and economic status, both in our state and across the nation. It will take a comprehensive, long-range approach, with collaboration among the many facets of the medical community, as well as public health and governmental agencies.

The Office of Women's Health has played an important role in our state in helping the collaborative process take place on a very real, tangible level. It has established a statewide presence with financial support for innovative programs focusing on women's health issues at the county level, and through osteoporosis screenings and girls' programming. The office has compiled and published data clarifying gaps in kinds and levels of services for women. This data has been distributed to county-level service providers, policymakers, and health departments to help them identify the specific needs of women in their communities and target underserved women for service.

The work of Indiana's Office of Women's Health has been recognized on a national level and is one of the models used by other states that are moving in the direction of establishing legislation. The office brings the voice of women to the table. Gradually, a network of influence is being built in our state in the health care field so that initiatives unique to women are not forgotten. The voice is strong and persistent, and it needs to be heard.

A handwritten signature in black ink that reads "Gregory Wilson, MD". The signature is fluid and cursive.

Gregory A. Wilson, MD
State Health Commissioner

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June 2004

The Office of Women's Health is five years into its existence, and our journey has just begun. As we go to press with our 2003-04 Annual Report, a release from the National Women's Law Center states that the basic goals for women's health set by the U. S. Department of Health are not being met—not by the nation as a whole nor by any individual state. In fact, the nation's "Women's Health Report Card" is one that no child would be comfortable taking home to his mother. In the areas of prenatal care, smoking cessation, and reducing obesity, to name just a few, there is much work to be done.



Indiana typically hovers near the low end of the health scale, compared with other states. What will it take for us to move up that scale? It will take a commitment across the medical disciplines to address the issues relevant to women, and a focus on those issues. It will take strong advocacy, financial resources, creative thinking, and education on both a personal and community-wide level. And perhaps most important, it will take a personal commitment by each one of us to make the lifestyle choices that will improve our own health and the health of our loved ones.

Our nation invests heavily in research and new technologies that help us live longer. But as women, we know that is only half the equation. We want to live with good health and vitality for as long as possible. To do that, we need to take responsibility for our own health. We must set a positive example for our daughters and sons, our sisters and mothers, and the men in our lives. We have the power to create a healthier population. If we model healthy behavior for our children—eating appropriately, exercising regularly, and not smoking—we eliminate the main risk factors in many diseases. We could cut the death rate in our state significantly by taking these three simple steps ourselves and within our families.

*We want to live with good
health and vitality for as
long as possible.*

Our office is dedicated to helping create a quality of life in Indiana that will cross the barriers between geography, socio-economic groups, and race. As the twentieth century begins to unfold, we look forward with excitement to the accelerating pace of research specific to women's health. The new concept of gender-specific medicine—the science of how normal human biology differs between men and women and how those differences affect diagnosis and treatment—will change the face of medical treatment for women. In the future, many doctors will incorporate this concept into their practices as more research delineates the differences of symptoms, medication effects, treatments and prognoses between men and women. At the Office of Women's Health, we will continue to look for ways to translate this new knowledge into action on behalf of the women of our state.

A handwritten signature in black ink that reads "Barbara Levy Tobey". The signature is fluid and cursive.

Barbara Levy Tobey
Director
Office of Women's Health

Osteoporosis

One of the first major responsibilities taken on by the Office of Women's Health after its creation was administration of the Indiana Osteoporosis Prevention Initiative, established by the State Legislature in 1997. It was a logical match: Osteoporosis is a major health threat for women, causing fractures in one of two females over the age of 55 in the United States. Prevention and treatment education was the program's initial objective. In February 2000, the Office expanded its objectives to include free screenings to women throughout the state, using an ultrasound bone densitometer. Staff were hired and trained, and in its first year of screenings, the program reached nearly one thousand women. Since then, the osteoporosis initiative has expanded at a lightening pace. During 2003, some 9,100 women took advantage of the free screenings, and in 2004, more than 4,100 women were reached by mid-May.

Screening and education services are taken to health fairs, churches, community service centers, grocery stores and pharmacies, organizational functions, and local health departments. In just over four years, the Office has visited 79 of the 92 counties in Indiana and screened a total of 26,322 women.

In order to reach increasing numbers of women throughout the state, the OWH has purchased three additional bone machines. The major thrust in southern Indiana has been to reach mostly rural communities, while staff in the northwest focuses on a more urban population. Thirty-one statewide screenings during May 2004 helped celebrate National Women's Health Week (May 9-15) and National Osteoporosis Prevention Month. A successful collaboration with Marsh Supermarkets provided many of the screening sites. In other targeted initiatives, OWH staff worked with the Community Centers of Indianapolis during the summer of 2003, visiting fifteen sites in Indianapolis to screen low income senior women. One of the initiative's busiest weekends during 2003 was at the Minority Health Fair, held in conjunction with Black Expo.

As new osteoporosis treatments are introduced, consumer education becomes increasingly critical. The Office of Women's Health is staying abreast of the latest advances in its continuing call to action to the women of Indiana.

“Osteoporosis is a preventable and treatable disease and should not be considered a normal part of aging.”

Susan Broy, MD, Center for
Arthritis and Osteoporosis, Illinois
Bone & Joint Institute

Jump Girl Jump!

Taking advantage of recent research that documents the value of jumping and high-impact exercise in childhood, the Office of Women's Health has developed a new osteoporosis-prevention program designed for girls. Research by the University of British Columbia has shown that regular high-impact exercise during adolescence can produce significant increases in bone mass, perhaps enough to delay or prevent osteoporosis later in life.

Jump Girl Jump! will be piloted in summer 2004 at the Girl Scouts' Camp Dellwood in Indianapolis. Targeted to 4th through 7th grade girls, the structured jump rope and nutrition program is designed to build awareness of the importance of physical activity and a diet of calcium-rich foods. With support from the Girl Scouts and Indy Air Bears, a competitive high-energy jump rope team, the program will be offered to hundreds of girls in central Indiana.

Women's Health

Mini-Grant Program

The Office of Women's Health and the Indiana Commission for Women created a women's health mini-grant program in 1999, and since then, more than \$543,840 has been distributed throughout the state to fund innovative programs designed to encourage healthful behaviors in underserved women and girls. The program offers the OWH a vehicle to support women's health issues throughout the state. A total of 47 counties have received funding during the past five years. Programs typically have been half-day events featuring a variety of health issues, including cardiovascular disease, substance abuse, eating disorders, osteoporosis, obesity, and domestic violence.

During the 2003-04 grant cycle, eighteen local health departments were awarded funding for events targeting underserved women in their communities. The departments have been encouraged to collaborate with other local organizations to maximize the impact of the dollars awarded. Topics in the past year have included menopause, heart disease, nutrition, physical activity, weight management, diabetes, osteoporosis, and smoking. Techniques used to disseminate information have included speakers, individual counseling, health screenings, educational materials, and displays.

2003-04 Mini-Grant Recipients

Allen County Health Department/Health Visions of Fort Wayne
Brown County Health Department
Clinton County Health Department
DeKalb County Health Department
City of East Chicago Health Department
Elkhart County Health Department/Hispanic Latino Health Coalition of Elkhart County, Inc.
Grant County Health Department
Harrison County Health Department/Harrison County Hospital
Jennings County Health Department
Knox County Health Department/Vincennes University and Good Samaritan Hospital
Marion County Health Department
Monroe County Health Department
Montgomery County Health Department
Owen County Health Department/Owen County Family YMCA
Parke County Health Department/Family Health and Help Center
Putnam County Health Department
St. Joseph County Health Department
Switzerland County Health Department

"When I entered the (Heart Alive) program, I was 50 pounds overweight. My cholesterol was not elevated, but my "good" cholesterol was just 15! The program referred me to my doctor and made me realize how easily I could have had a stroke or heart attack. I joined Weight Watchers at work and lost the 50 pounds in a year and a half, raised my good cholesterol to 42, and became a much more active person."

Mary Ann Zupan,
Indiana State
Department of Health

Heart Alive!

Heart Alive! is a six-month worksite wellness program sponsored by the Office of Women's Health for Indiana state employees, with the goal of encouraging healthy lifestyle choices. Participants complete an exercise continuum and nutrition profile, and they are given six free screenings, courtesy of the Marion County Health Department. Education sessions personalize the information.

Heart Alive! has evolved from a pilot program first offered to Indiana State Department of Health employees in 2000 to include several other state agencies. Response from participants through the years has shown the value of the screenings and educational counseling, and the personal awareness they evoke. In 2004, Indiana State Department of Health employees received a second opportunity to participate.



M a k i n g a D i f f e r e n c e

In its mission to create a state of healthy women, during the past five years the OWH has taken its messages to every region in Indiana, to cities and rural areas, and to demographic groups ranging from state legislators to underserved, low socio-economic groups. Whether sitting at the table with policy makers, working quietly behind the scenes to provide leadership and direction, making funds available to victims of sexual abuse, or taking screening services to women in small towns, the Office of Women's Health has made its presence known across the vast landscape of women's health care issues.

"The establishment of the Office of Women's Health has proven to be a positive decision . . . We have seen the important distribution of ongoing information to Hoosier women on healthcare issues, as well as healthcare screenings made available to many women statewide."

Representative Vaneta Becker,
Indiana House of Representatives

Collaboration

During 2003-04, the Office continued developing its relationships with health-related committees and conferences throughout the state. Office staff sat on various boards and committees to lend leadership expertise, to help set priorities and directions, and to keep the agenda of women's health at the forefront of discussion. Staff commitments in the 2003-04 year include breast and cervical cancer, minority health, nutrition, asthma, and health care needs of incarcerated women.

Mentoring

To provide educational opportunities for young women in the health care field, the OWH has developed a cooperative program with the Indiana University School of Nursing. Second year nursing students are mentored by and work with staff in the osteoporosis prevention initiative.

OWH staff participated on a steering committee to form an Indiana chapter of the Healthcare Businesswomen's Association (HBA) in 2003. The HBA offers programs to provide career-building skills, to keep up to date on medical advances, and to offer support to healthcare professionals.

Advocacy

Through its administration of the Sexual Assault Victims Assistance Fund, the OWH makes financial assistance available to rape crisis centers in Indiana. The Office designated the Indiana Coalition Against Sexual Assault to receive the funds during 2003-04, and a total of \$33,000 was made available for services.

The Office also provided financial assistance for health outreach to local Hispanic women and families, for rape awareness programs, and for services for abused women and their children.

Outreach

During the National Governor's Association meeting held in Indianapolis in August 2003, the Office coordinated a health fair for governors' spouses, and Barbara Levy Tobey spoke on Building Partners in Support of Women's Health at the business session.

In 2004, the Indiana Office was honored to be selected by Women in Government, based in Washington, D.C., as one of two model programs in the United States. Barbara Levy Tobey was asked to make a presentation at the "First Annual Summit of the Offices of Women's Health on Cardiovascular Disease in Women" in Tucson, AZ. The conference helped build a national network of women's health professionals across the United States.

A d v i s o r y B o a r d

Senator Vi Simpson, Co-chair
Indiana State Senate

Representative Vaneta Becker, Co-chair
Indiana House of Representatives

Senator Billie Breaux
Indiana State Senate

Senator Beverly Gard
Indiana State Senate

Senator Connie Lawson
Indiana State Senate

Representative Vanessa Summers
Indiana House of Representatives

Esther Acree, RN, MSN, FNP
Past president, IN State Nurses' Association

Robbie Barkley
Vice President, American Heart Association, Midwest Affiliate

Martha Bonds
Office of Minority Health
IN State Department of Health

Nancy Branyas, MD
The Care Group

Virginia A. Caine, MD
Director, Marion County Health Department

Jane B. Chappell, RN, MSN
Executive Director, Tri-Cap

Annette E. Craycraft
Executive Director, IN Commission for Women

Susan Crosby
Deputy Executive Director, Women in Government

Rose Fife, MD
Director, National Center of Excellence in Women's Health

Maria Fletcher, MD
Clinical Faculty, St. Vincent Primary Care Center

Jill D. Hagan
Vice President, Union Planters Bank

Sally Johnson Hartman, RNC, MSN
Assistant Professor, Maternal/Child Health
Indiana/Purdue at Fort Wayne

Nancy Hines
Co-founder,
Ovar'coming Together

Janet Johnson
Deputy Director,
Children's Services

Nancy Meade, RD, MPH
Chronic Disease
Coordinator, IN State
Department of Health

Danielle Patterson
Director, Minority Health,
IN State Department of
Health

Sue Phillips, BS, RN
Director, Community Outreach, Clark Memorial Hospital

Mary Pilat, PhD
Associate Professor/Principal Investigator
Purdue University

Irene Queiro-Tajalli, PhD
Executive Director, Undergraduate Education
IU School of Social Work

Leslie Raymer
Development Coordinator, Center for Nonviolence

Joanne Sanders
International Representative,
International Alliance of Theatrical Stage Employees, et al.

Karla S. Sneegas, MPH
Executive Director, IN Tobacco Prevention & Cessation Agency

Lucia Spears, MD
Indianapolis Breast Center

Cheryl G. Sullivan
Secretary, IN Family and Social Services Administration

Gazella A. Summitt
Director of Human Resources/Affirmative Action,
Vincennes University



Jeanne Hawkins Van Tyle, PharmD
Professor of Pharmacy, Butler University

Julia Vaughn
Governor's Council for People with Disabilities

Gayla Winston
President, IN Family Health Council

Charlotte Zietlow, PhD
Economic Development Coordinator,
MiddleWay House

“As a legislator, when you draft legislation you have a vision of how it might improve the lives of people. Never in my imagination did I envision such a dynamic outcome as the creation of an Office of Women’s Health in Indiana. Not only has the Office accomplished so much that impacts the lives of women in Indiana, but it is recognized nationally as a model for other states.”

Susan Crosby, Deputy Executive Director, Women in Government
Former Indiana State Representative

S t a f f

Barbara Levy Tobey
Director

Andrea Frye
Program Director

Keisha Banks
Program Director

Janet Corvin
Administrative Assistant



Office of Women’s Health

Indiana State Department of Health

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